X \$ 250 =	500							
X \$ 50 =	T							
X \$ 200 =	600							
+ \$ 360 =								
TOTAL	\$ 000							
OTHER THAN SMALL ENTITY ADDI-								
RATE	TIONAL FEE							
X \$ 50 =	. \							
< \$ 200 <b>=</b>	٠.							
\$ 360 =	:							
TAL ADDIT FEE								

FEE

BEST AVAILABLE COPY

Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

	Effective December 8, 2004								W	Wursthoff			
			(Co	D - PART I		lumn 2)		SMALL E	NTITY	O		ER THAN L ENTITY	
U	S. NATIONAL	L STAGE FEES				RATE	- FEE	7					
B/	SIC FEE		SMALL	SMALL ENT. = \$ 150 LARGE ENT. = \$ 30			$\dashv$		FEE		RATE	FEE	
EXAMINATION FEE				Satisfies PCT Article 33(1)- All other situations =			-	BASIC FEE		OF	BASIC FEE	300	
SEARCH FEE			U.S. Is ISA	(4) = \$50/\$100 \$100/\$200 U.S. Is ISA = \$50/\$100 ALL other countries = All other situations =			-	EXAM. FEE SEARCH FEE		-	EXAM. FEE	200	
FEE FOR EXTRA SPEC. PGS.				\$ 200 / \$ 400 \$ 250 / \$ 500			4	SEARCH FEE			SEARCH FE	= 19 <i>0</i> 2	
TOTAL CHARGEABLE CLAIMS			1/33	Minus 100 = 53 p 50 =				X \$ 125 =	-		X \$ 250	500	
-	INDEPENDENT CLAIMS			)   minus 20 = *				X \$ 25 =		OR	X \$ 50 =		
	4 miles 3 =  * \$						X \$ 100 =		OR	X \$ 200 =	600		
	MULTIPLE DEPENDENT CLAIM PRESENT						+\$180=		OR	+ \$ 360 =	- <del> </del>		
•	If the difference in column 1 is less than zero, enter "0" in column 2						TOTAL	·	OR	TOTAL	\$ 000		
		CLAIMS AS	AMENDE	D - PART I	1			: .		_	-		
·	<del>                                     </del>	(Column 1)		(Column :		Column 3)		SMALL	ENTITY	·OR		THAN ENTITY	
AMENDMENT A		REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUS PAID FOR	LY   F	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	
	Total	*	Minus	**	=			X \$ 25 =		OR	X \$ 50 =	FEE	
AME	Independent	*	Minus	***	=			X \$ 100 =	·	<b> </b>			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					ŀ	+ \$ 180 =		OR	X \$ 200 =			
		•		·			L	OTAL ADDIT.		OR OR	+ \$ 360 =		
		(Column 1)		(Column 2	) (C	olumn 3)		, , , , , , , , , , , , , , , , , , ,		Ÿ	PEE		
EN B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSL' PAID FOR	PF	ESENT EXTRA	ſ	RATE	ADDI- TIONAL FEE	Γ	RATE	ADDI- TIONAL	

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

Minus .

Minus

\*\*\*

AMENDME

Total

Independent

OR

OR

OR

OR

X \$ 50 =

X \$ 200 =

+ \$ 360 =

TOTAL ADDIT.

X \$ 25 =

X \$ 100 =

+ \$ 180 =

TOTAL ADDIT

FEE

if the entry in column 1 is less than the entry in column 2, write "0" in column 3,

If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".

<sup>\*\*\*</sup> If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.